Standard Form No. 1034 7 GAO 5030 1034-107

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Approved For Release 2008/12/22 : CIA-RDP65-00523R000100100010-0

PULE C VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

| D. O. VOU. NO | |
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Use continuation sheet(s) if necessary

BU. VOU. NO. 22

| Voucher prepared at Rochester, New York (Give place and date) Payee's Account No. Z=2053 Discount Terms TO Eastman Kodak Company Payer | U. SGov | vernment | (0) | | | | _ | PAID BY |
|---|--|------------------------|--|---------------------|-------------------|---------------|-----------------|--|
| Payee's Account No. Z-2053 Discount Terms TO Eastman Kodak Company Payer State Street Rochester New York | Voucher prep | oared at | Rochester, New York | October | 26, 196 | 0 | | a Dal |
| TO Eastman Kodak Company Copy OF 2 Copy OF 2 | Payee's Account No. Z-2053 Discount Terms TO Eastman Kodak Company [Poyee] 313 State Street Rochester 4, New Yor Astrictes of Services No. and Date of Delivery or Service schedule, and other information deemed necessary) PAYMENT: COMPLETE PARTIAL PROGRESS Above the Approved for | | | | | | | Ruch #1 |
| Sala State Street | i dyce s Acco | | | | | | 1 ' | and the second s |
| Contract No.HF-CJ-2219 Date 2/19/58 Req. No. Date Govt. B/L No. No. and Date of Date of Date of Date Service Schedule, and other information deemed necessary) P/5/60 Reimbursable Costs Incurred Partial | то | Eastman (Payee) | Kodak Company | . | | | | DPY / OF L |
| Shipped from to Weight Govt. B/L No. No. and Date of Service Schools, and other information deemed necessary) Variable | | 343 Stat | e Street | Rochester 4 | , New Y | ork | | |
| No. and Date of Delivery (Enter description, item number of contract or Federal supply Order or Service schedule, and other information deemed necessary) 9/5/60 Reimbursable Costs Incurred \$2,301. PAYMENT: COMPLETE PARTIAL FINAL | | -CJ-2219 | Daio Roq. | | | Govt. B/L | | e Rec'd. |
| PAYMENT: COMPLETE PARTIAL PROGRESS PAYMENT Approved for By Title Exchange rate Schedule, and other information deemed necessary) Reimbursable Costs Incurred \$2,301. (PAYEE MUST NOT USE THIS SPACE) DIFFERENCES Amount verified; correct for (Signature or initials) Pursuant to authority vested in me, I certify that this voucher is correct and proper for payment. STAT (Authorized Certifying Officer) (Date) THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM | No. and Date of | Date of Delivery | ARTICLES OR SERV | VICES | dy Ouendan | UNIT | PRICE | AMOUNT |
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| * When used in foreign countries, insert name of currency of country in which used | | | | | | | | |
| † If the ability to certify and authority to approve are combined in one person, one signature only is necessary; oftierwise the approving officer will sign on the line below "Approved for \$", and Title | † If the ability to co essary; otherwise the a | ertify and authority t | to approve are combined in one person, one s | '', and | | | | |

Approved For Release 2008/12/22 : CIA-RDP65-00523R00010010010-0 Standard Form No. 1035—Revised Form prescribed by Comptroller General, U. S. September 7, 1950 (Gen. Reg., No. 51, Supp. No. 11) Pt 'ic Voucher for Purchases a. Services Other Than Paranal

CONTINUATION SHEET

| or Service | ARTICLES OR SERVICES on, item number of contract or Fe and other information deemed ne ategories | ederal supply schedule, | QUAN- TITY | Cost | Per | Dollars | Cts |
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DPD - 508660 COPY / OF 1

October 28, 1960

Dear Sir:

Under Contract HF-CJ-2219 we are forwarding Bureau Voucher No. 22 in the amount of \$2,301.05 which represents reimbursable costs incurred during the period September 5, 1960 through October 2, 1960.

The travel billed in Bureau Voucher No. 22 is explained as follows:

8/24/60-8/30/60

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